PTO/SB/01 (10-01)

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	Attorney Docket Number	00239	
DECLARATION FOR UTILITY OR DESIGN	First Named Inventor	James Bartz	
PATENT APPLICATION	COMPLETE IF KNOWN		
(37 CFR 1.63)	Application Number		
X Declaration Submitted OR Submitted after Initial With Initial Filing (37 CFR 1.16 (e)) required)	Filing Date	2/7/01	
	Art Unit		
	Examiner Name		

As the below named inventor, I hereby declare that:				
My residence, mailing address, and d	itizenship are as stated belo	ow next to my name.		
I believe I am the original and first inve	entor of the subject matter	which is claimed and for wh	nich a patent is soug	ght on the invention entitled
strained and for which a patent is sought on the invention entitled. STRING STATION				
the specification of which	(Title of the I	invention)		
X is attached hereto			,	
or was filed on (MM/DD/YYYY) as United States Application Number or PCT International				
Application Number	and was amend	led on (MM/DD/YYYY)		(if applicable).
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.				
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1,56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.				
I hereby daim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.				
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:				

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.				
NAME OF SOLE OR FIRST INVENTOR :	A petition I	nas bee	en filed for this unsigr	ned inventor
Given Name (first and middle [if any]) James			y Name rname Bartz	
Inventor's Signature Ann South	\mathcal{L}_{A}			
Residence: City Milwaukee	State WI		Country US	Citizenship US
Mailing Address 5777 Milwaukee River Parkway				
city Glendale	State WI		zip 53209	Country US
NAME OF SECOND INVENTOR:	A petition ha	s been	filed for this unsigne	d inventor
Given Name (first and middle [if any]) Family Name or Surname				
Inventor's Signature				Date
Residence: City	State		Country	Citizenship
Mailing Address				
City	State		ZIP	Country
Additional inventors are being named on thesu	oplemental Addition	onal Inve	entor(s) sheet(s) PTO/SB/	02A attached hereto.

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PTO/SB/81 (02-01)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	12/7/01
First Named Inventor	James Bartz
Title	STRING STATION
Group Art Unit	
Examiner Name	
Attorney Docket Number	00239

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I am the: Applicant/Inventor.				
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).				
SIGNATURE of Applicant or Assignee of Record				
Name James Bartz				
	TIKRE			
Signature Daniel				
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